RM01 Student/Volunteer Approval Process

NOTE: The approval process takes approximately 5 business days for processing.

- Department determines the need for a student/volunteer to operate a vehicle on University Business
 and sends the completed RM01 and *USA General Release Forms to Risk Management. Forms may be
 submitted via fax or Purdue FileLocker to Lisa Fortner. Make sure to complete your department's
 account number (I/O or WBS #) in the middle section of the RM01 form.
- Risk Management requests an MVR check and will notify both the driver and the departmental approver via email of approval or denial of Request for Driver Authorization.

*If a driver is licensed in the state of Georgia, Pennsylvania, or Washington, the USA General Release Form is not valid. Those drivers should locate and complete the state-specific release form on the Risk Management website. Form RM01 – Rev. 3-2013

Purdue University Request for Driver Authorization – Student/Volunteer

Please TYPE or CLEARLY PRINT all information exactly as it appears on your Driver's License. Submit form to Risk Management. Allow approximately 5 business days for processing.

Driver Name (First)		_(MI)		_(Last)			
Address (Street)				(City)			_(State)	(Zip)
PUID #:			Email Address:					
Driver's License#:			State/Province Issued by:					
Expiration. Date (m		DOB (mm/dd/yyyy):						
Status (check one): Student Employee			Student		_	Voluntee	r	
Department/Stude	nt Organization Name:							
by all the obligation acceptable driving If approved, I he department/studen granting this permi	hat I have read and understans and requirements container record (as outlined in the char ereby grant permission to Pu t organization affiliation in th ssion does not constitute a m	ed therein. I understand art below), will result in r rdue University to includ e University's Approved elease of my education	e Universi I that failur revocation Ie my nam Driver Da record by	ity policy "I re to comp of Univers ne, the last atabase ac Purdue Ur	Use of Veloly with the sity driving t four digits cessible o niversity.	hicles for L ese require privileges s of my Dri n the Risk	ments, and/or ver's License I Management	failure to maintain an Number, and my website. I understand that
requesting appro	nicle Record (MVR) checl wal. For departmental re uests, Advisor signature,	quests, Dept. Head/B	us Ofc. s	signature,	, Fund, ar	nd Cost C	enter are rec	
FOR DEPARTMENTAL REQUESTS:								
Fund #:			_					
Cost Center:								
- ·	ent Head/Business Office	date	- - -					
Printed Name-Dep	artment Head/Business Offic	Ce						
Dept Head/Bus Of	c Approver's e-mail address		_					
						г		
	ACCEPTABLE	UNACCEPTA		BLE			Risk Management Use Only	
Moving Violations	2 or fewer violations in the past 3 years.	3 or more violations in the past 3 years				Approved		
At-Fault Crashes	1 or fewer crashes in the past 3 years	2 or more crashes in the past 3 years				Denied		
Major Offenses		A single citation in the past 3 years for any of the following offenses:			Date			
		-any alcohol or drug-related driv		d driving of	ffenses			
		-refusal to submit to a blood alcohol test		l test		RM Appr	oval Signature	
		-rec	ckless driv	ring			11	C
		-leaving the	scene of	an accidei	nt		Valid Thr	ough Date

-any felony crime committed with a vehicle

Fax Completed form to Risk Management @ 765-496-1338

USA General Disclosure and Consent Form for Motor Vehicle Reports

Purdue University 401 South Grant Street West Lafayette, IN, 47907 Phone: (765) 494-1690									
Requestor Information:									
Company Name: Purdue University	Contact Person: Lisa Fortner								
Contact Phone: 765-494-8104	Contact Fax: 765-496-1338								
Applicant/Subject Information: Please Type or Clearly Print All Requested Information									
Name: (First)(MI)	(Last)								
Street Address:City	y:ST: Zip:								
Email Address:									
PUID:Departme	ent Name:								
Drivers License Number:	State:								
Date of Birth:									

In connection with your request to operate a vehicle on Purdue University business, a consumer report, as defined by the Fair Credit Reporting Act ("FCRA"), may be obtained by Purdue University from an external Consumer Reporting Agency. Purdue University may be requesting information from various Federal, State, and other agencies which maintain records concerning past activities relating to your driving records.

I hereby authorize Purdue University to obtain consumer reports related to my driving records at any time after receipt of this authorization, to the extent allowed by law, so long as I continue to operate a vehicle on behalf of Purdue University. I agree that this Authorization will be valid, now or in the future, in original, facsimile, copied, or electronic form. I recognize that these inquiries may be made randomly in the future and no further authorization is required by me.

I hereby consent to Purdue University obtaining such information from Sonic e-Learning Inc. and/or any of their agents.

Applicant's Signature: X Date:

Printed Name of Applicant: X____

Please fax completed form to Purdue University Risk Management at 765-496-1338